



CHEDDINGTON PLAYScheme

c/o 9 Gooseacre

Cheddington

Beds LU7 0SR

Tel Amy or Ben 01296 662847

Tel Karen 01296 661284

Email: cheddingtonplayscheme@gmail.com

www.cheddingtonplayscheme.co.uk

CHEDDINGTON SUMMER PLAYScheme 2019

JULY 29/30/31 August 1/2

Morning Session

10.00 am - 12.30 pm

Afternoon Session

1.30 pm - 4.00 pm

If you would like your child/children to attend the Cheddington Playscheme* at Cheddington School this summer, please complete and return the form overleaf and return it to the collection box in the school office or to 9 Gooseacre, Cheddington by **Friday 28 June 2019 to qualify for our discounted rate.**

Application received after this date will be at the non-discounted rate.

The Playscheme will be open to all **children aged 5-12** years who either attend Cheddington School (at the time of booking) or live in the village of Cheddington. We will be running two sessions each day (morning and afternoon) and **children must be collected and taken off the premises at lunchtime Monday to Thursday.** Our insurance is only valid whilst sessions are running, and we cannot be responsible for children over the lunchtime period.

The Playscheme will run for 5 days and will include a wide variety of crafts, sporting activities, workshops and inflatable play equipment. **On Friday children will stay for a barbecue lunch, along with a disco and other activities, including a water fight, so a change of clothes/towel would be useful (this session will end at 3pm, not 4pm).**

Charges are as follows:

£10.50 per day per child (£52.50 for 5 days)

If **5 days** are booked for **one child** by **28 June** the charge for 5 days will be **discounted to £48. for the first child**

Places will be allocated by drawing forms from the collection box; allocation being on a daily basis, i.e. each child gets one day, then each child gets two days etc., until all days are full. We anticipate around 100 spaces per day.

To enable us to run the scheme successfully we need some voluntary helpers, Mums, Dads, Grannies, Granddads, in fact anyone over the age of 18 who is willing to give up a few hours of their time. If you are able to help, please complete the attached form. However, we regret that children under 5 cannot accompany you to the Playscheme.

Please tick the days on the application form you wish your child to attend and enclose it with the correct money (cheques made payable to Cheddington Playscheme) in a sealed envelope clearly marked 'PLAYScheme'. Please ensure you complete all the sections on the form, including details of any medical conditions and emergency contact details. **Forms should be returned to the School Secretary's office or to 9 Gooseacre, Cheddington BY Friday 28 June 2019 to qualify for our discounted rate.**

Enquiries to Amy or Ben Moulton, Tel :01296 662847 / or Karen Chapman Tel: 01296 661284

Email: cheddingtonplayscheme@gmail.com or www.cheddingtonplayscheme.co.uk

For details of our PRIVACY NOTICE please see our website

* Assisted by Cheddington Parish Council and Cheddington Townlands Trust

CHEDDINGTON SUMMER PLAYScheme 2019

FAMILY APPLICATION FORM

PLEASE TICK THE DAYS YOU WOULD LIKE YOUR CHILD/CHILDREN TO ATTEND:

MONDAY 29 JULY	£10.50	
TUESDAY 30 JULY	£10.50	
WEDNESDAY 31 JULY	£10.50	
THURSDAY 1 AUGUST	£10.50	
FRIDAY 2 AUGUST (MAY GET WET!)	£10.50	
TOTAL ENCLOSED		

(If **5 days** are booked for **one child** by **28 June 2019** the rate will be **discounted to £48 for the first child**)

Child's age as at 29 July 2019

1ST CHILD (NAME)..... Age.....
 2ND CHILD (NAME)..... Age.....
 3RD CHILD (NAME)..... Age.....
 4TH CHILD (NAME)..... Age.....

ADDRESS

TELEPHONE NO.

ALTERNATIVE CONTACT NO.RELATIONSHIP TO CHILD.....

EMAIL ADDRESS

DOES YOUR CHILD HAVE ANY MEDICAL PROBLEMS/ALLERGIES? YES / NO

CHILD'S NAME DETAILS

DOES YOUR CHILD HAVE ANY DIETARY RESTRICTIONS?

CHILD'S NAME DETAILS

IN CASE OF ACCIDENT/EMERGENCY DO YOU GIVE YOUR CONSENT FOR MEDICAL TREATMENT TO BE GIVEN AND FOR YOUR CHILD/CHILDREN TO BE TAKEN TO A HOSPITAL AND TREATED THERE?	YES	NO
DO YOU GIVE CONSENT FOR YOUR CHILD/CHILDREN TO BE TREATED FOR MINOR INJURIES BY AN ADULT HOLDING A VALID FIRST AID CERTIFICATE (eg APPLICATION OF PLASTER)?	YES	NO
DO YOU GIVE CONSENT FOR YOUR CHILD TO HAVE AN ANTI-STING SPRAY (eg WASPEZE) APPLIED IN THE CASE OF INSECT BITES/WASP STINGS?	YES	NO
DO YOU GIVE PERMISSION FOR PHOTOGRAPHS TAKEN TO BE SHARED ON OUR WEBSITE AND FACEBOOK PAGE?	YES	NO
DO YOU GIVE PERMISSION FOR PHOTOGRAPHS TO BE TAKEN BY THE BUCKS HERALD?	YES	NO

SIGNED DATE

(PARENT/GUARDIAN)

PRINT NAME

WE ENCOURAGE GOOD BEHAVIOUR AND COURTESY DURING THE PLAYScheme, AND RESERVE THE RIGHT TO ASK A CHILD TO LEAVE THE SCHEME IF THEIR BEHAVIOUR IS CONSIDERED UNACCEPTABLE.

IF YOU OR A FAMILY MEMBER ARE ABLE TO VOLUNTEER TO HELP PLEASE INDICATE WHICH DAY OR DAYS MON / TUES / WED / THURS / FRI

FIRST NAME SURNAME.....

PLACE THIS COMPLETED FORM WITH THE CORRECT PAYMENT (CHEQUES PAYABLE TO "CHEDDINGTON PLAYScheme") IN A SEALED ENVELOPE, AND RETURN TO THE SCHOOL OFFICE OR DELIVER TO 9 GOOSEACRE, CHEDDINGTON BY 28 JUNE 2019 TO QUALIFY FOR OUR DISCOUNTED RATE.